

Commonwealth of Kentucky
Office of Insurance - Agent Licensing Division
P. O. Box 517 - Frankfort, Ky. 40602
502-564-6004 <http://doi.ppr.ky.gov/>

CONTINUING EDUCATION COURSE ATTENDANCE ROSTER

This form is available only to approved continuing education course providers. If you are an approved provider, please send your written request for this form to:

Kentucky Office of Insurance
Agent Licensing Division
Attn: Education Section
P. O. Box 517
Frankfort, KY 40602

Or you may submit your written request via e-mail to:

KOIAgentLicensingMail@ky.gov

The Roster is used to submit proof of licensee attendance for classroom-style courses only, and must be submitted directly to the Office of Insurance within thirty (30) days from the date the course was completed. In addition to the Roster, a Certificate of Completion must be given directly to the student upon completion of the course to be retained for a minimum of three (3) years. Further, the provider is required to retain a copy of the Certificate of Completion in the provider's files for a minimum of three (3) years.

Please visit our Web site at <http://doi.ppr.ky.gov> to confirm that each licensee has received credit.